

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	HEMOPHILIA TREATMENT BY INHALATION OF COAGULATION FACTORS

Attorney Docket Number::	50657-00004USPT
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	5
Total Drawing Sheets::	9
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Robert
Middle Name::	G.
Family Name::	Schaub
City of Residence::	Pelham
State or Province of Residence::	NH
Country of Residence::	US

Street of mailing address:: 118 Jeremy Hill Road
City of mailing address:: Pelham
State or Province of mailing address:: NH
Postal or Zip Code of mailing address:: 03076

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Nicholas
Middle Name:: W.
Family Name:: Warne

City of Residence:: Andover
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 27 Farrwood Drive
City of mailing address:: Andover
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 01810

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Andrew
Middle Name:: J.
Family Name:: Dorner
City of Residence:: Lexington
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 20 Baskin Road
City of mailing address:: Lexington
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 02421

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: David
Middle Name:: K.
Family Name:: Gong
City of Residence:: San Carlos
State or Province of Residence:: CA
Country of Residence:: US
Street of mailing address:: 175 Calvert Drive #A102
City of mailing address:: Cupertino
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 95014

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Jayne
Middle Name:: E.
Family Name:: Hastedt
City of Residence:: San Carlos
State or Province of Residence:: CA
Country of Residence:: US
Street of mailing address:: c/o Mark Wilson
Nektar Therapeutics; 150 Industrial Road
City of mailing address:: San Carlos
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94070

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US

Status:: Full Capacity
Given Name:: Chandra
Middle Name:: A.
Family Name:: Webb
City of Residence:: Pelham
State or Province of Residence:: NH
Country of Residence:: US
Street of mailing address:: 313 Gage Hill Road
City of mailing address:: Pelham
State or Province of mailing address:: NH
Postal or Zip Code of mailing address:: 03076

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: James
Middle Name:: C.
Family Name:: Keith
Name Suffix:: Jr., D.v.m., Ph.d.
City of Residence:: Andover
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 28 Vine Street
City of mailing address:: Andover
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 01810

Correspondence Information

Correspondence Customer Number:: 24238

Representative Information

Representative Customer Number:: 24238

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application claiming the benefit under 35 USC 119(e)	60/461460	04/09/03

Assignee Information

Assignee name:: Wyeth
Street of mailing address:: 87 CambridgePark Drive
City of mailing address:: Cambridge
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 02140

Assignee name:: Nektar Therapeutics
Street of mailing address:: 150 Industrial Road
City of mailing address:: San Carlos
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94070